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PTO/SB/01 (12-97)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	US 18024
	First Named Inventor	Tiziano Dall'Occo et al.
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	August 27, 2001
	Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Process for the preparation of ethylene polymers

the specification of which
☐ is attached hereto
 OR
☒ was filed on (MM/DD/YYYY) **12/22/2000** as United States Application Number or PCT International Application Number **PC1/EP00/1319** and was amended on (MM/DD/YYYY) **05/28/2001** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.58.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(e) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
99204566.6	EP	(12/28/1999)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

☒ I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 35(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of this application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)
PCT/EP00/13192	(12/22/2000)	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Margaret S. Millikin	38,969	William R. Reid	47,894
Joanne W. Patterson	31,217	Cristina Reverzani	Limited Reog.

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label ☒ Correspondence address below

Name	William R. Reid				
Address	Basell North America Inc.				
Address	912 Appleton Road				
City	Elkton	State	MD	ZIP	21921
Country	US	Telephone	410-996-1783	Fax	410-996-1560

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Tiziano		Dall'Occo	
Inventor's Signature	<i>Tiziano Dall'Occo</i>		Date
Residence: City	Ferrara	State	Country
Post Office Address	Via E. Farolfi 3		
Post Office Address			
City	Ferrara	State	Country
		ZIP	44100
			IT

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Ofelia				Fusco			
Inventor's Signature	<i>Ofelia Fusco</i>					Date	5 July 2001
Residence: City	Ferrara	State		Country	IT	Citizenship	IT
Post Office Address	Via Mulinato 63						
Post Office Address							
City	Ferrara	State		ZIP	44100	Country	IT
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Ilya E.				Nifant'ev			
Inventor's Signature	<i>Ilya E. Nifant'ev</i>					Date	12 July 2001
Residence: City	Moscow	State		Country	RU	Citizenship	RU
Post Office Address	Bakinskikh komissarov, Str. 12/3, appt.60						
Post Office Address							
City	Moscow	State		ZIP	119899	Country	RU
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Ilya P.				Laishevtsev			
Inventor's Signature	<i>Ilya P. Laishevtsev</i>					Date	12 July 2001
Residence: City	Moscow	State		Country	RU	Citizenship	RU
Post Office Address	appt.V-1255 Main Building, Moscow State University, Lenin's Hill						
Post Office Address							
City	Moscow	State		ZIP	117234	Country	RU

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